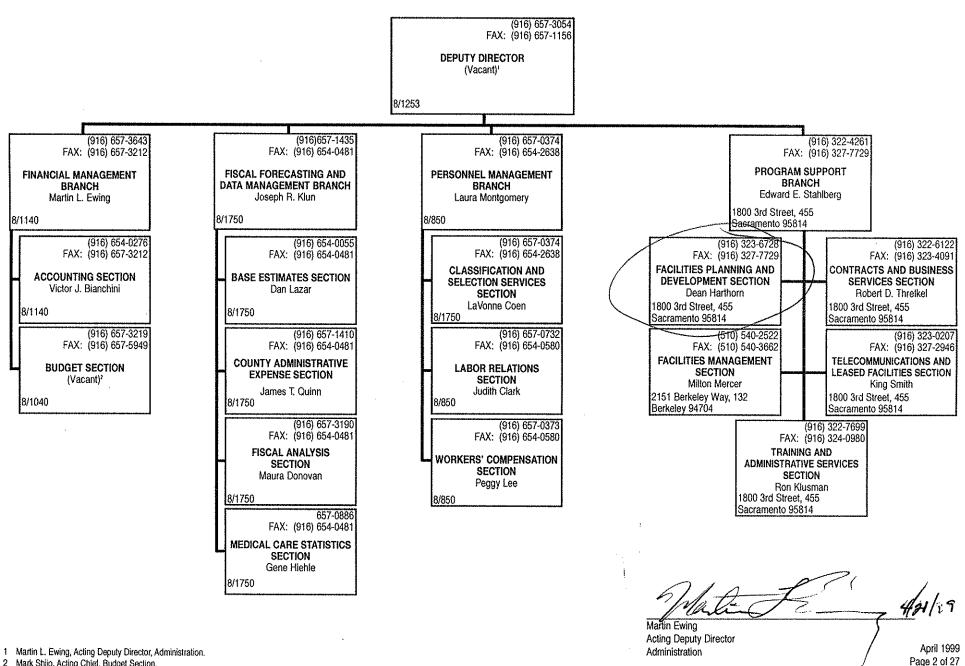
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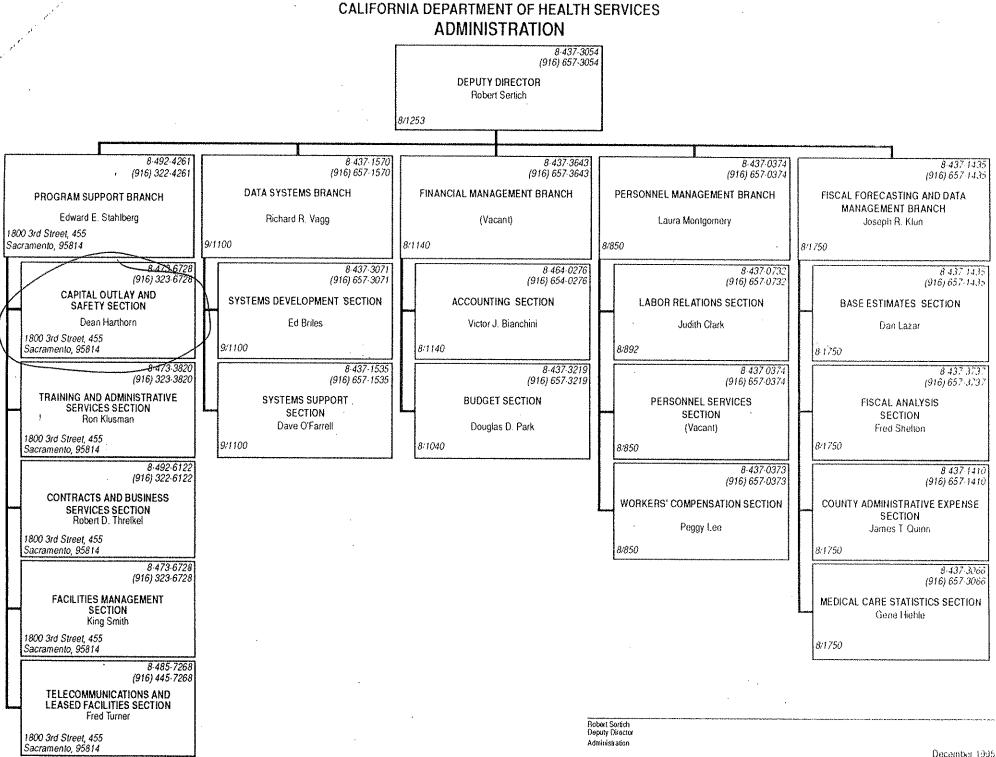
RECORDS RETENTION SCHEDULE APPROVAL REQUEST

Submit three copies wi	Submit three copies with three copies of the Records Retention Schedule, DHS/STD 73. [Branch(es)] [Branch(es)]	Is Retention Scheu		(See reverse for additional space.)	1
Administration Section(s)/Unit Facilities Planning and Development		onesiona. Em	Employee Relations Health & Sacet	4 Training Sections	
Address (number, street, city) 1800 Third Street, Ro	nento, C	95814	-	85481 (8270)	
TO: Department of General Services Procurement Division		Check the appropriate box: (2) New schedule of rec	Check the appropriate box: (2) New schedule of records that have never been scheduled.	scheduled. (Complete boxes 58.)	
Statewide Information and Management Program 3240 Industrial Boulevard West Sacramento, CA 95	1 Records 691 (or IMS C-229)	(3) Sevising a preving A new approva (A new approva (A) Amending some (The original ap	 (3)	s 5—12.) (Complete boxes 8—12.) fect.)	
(916) 375-7420 NEW SCHEDULE INFORMATION (If applicable)	(5) Schedule number H99-013	(6) Schedule date 8/13/99	(7) Number of pages	(8) Cubic Feet (total schedule)	
PREVIOUS SCHEDULE INFORMATION (If applicable)	(9) Schedule number 129	(10) Approval number(s) 87-301	(11) Approval date(s) 10-19-87	(12) Page number(s) revised 6	
NCY	STATEMENTS				
As the program ma attached schedule, Manual) that each previous schedule	As the program manager (or person authorized to sign for the program manager) directly responsible for the records listed on the attached schedule, I certify that all records are listed, that I have reviewed the need for the records, (per the State Administrative Manual) that each retention period is necessary and correct as scheduled, and (for a revised schedule) that all items on the previous schedule have been accounted for.	ign for the program r d, that I have review nd correct as schec	manager) directly responsible ed the need for the records, fuled, and (for a revised sc	e for the records listed on the (per the State Administrative hedule) that all items on the	
(13) Signature—Manager directly respon	consible for the records	(14) Title Chief	ine	(15) Date signed	***************************************
In accordance with General Services in the factors listed in	In accordance with Government Code 14755, approval of the attached Records Retention Schedule General Services is hereby requested. Retention periods have been established by this agency after a the factors listed in the State Administrative Manual.	proval of the attach periods have been e	ed Records Retention Sch stablished by this agency at	edule by the Department of ter a careful evaluation of all	
I hereby certify that of records. (Per th	I hereby certify that I am authorized to act on behalf of the head of this agency in matters pertaining to the of records. (Per the State Administrative Manual.)	f of the head of this a	agency in matters pertaining	to the retention and disposal	
(16) Signature—Records Management Analyst	it Analyst	(47) T A	AGPA		
(18) Name (printed or type) Raymond . Haag	9	(19) (19)	(19) Telephone (916) 323-3817	(20) Date signed 8-19-99	
PART II—DEPARTMENT OF	MENT OF GENERAL SER	VICES APPROV	GENERAL SERVICES APPROVAL (Per Government Code	Code Section 14755)	-
(21) Signature—DGS Consultant (28) Ramona M.	Materiae)	(22)	(22) Approval number		
(23) Title Records Mana	Management Consultant	(24)	(24) Date signed 9 29 99		
PART III—ARCHIVA	-ARCHIVAL SELECTION (Per Government Code		Section 14755)		
(25) Contains no material s California State Archives.	no material subject to further review State Archives.	view by the			
(26) Contains mater "Hold/Notify A clearance by the State Admir	ival revi ot be tate. (I	view. Items stamped destroyed without (Per Section 1614 of			
(27) Signature—CHIEF OF ARCHIV	ature—CHIEF OF ARCHIVES (38) Approve (38)	MAH IAAN			
Confinency and	1				

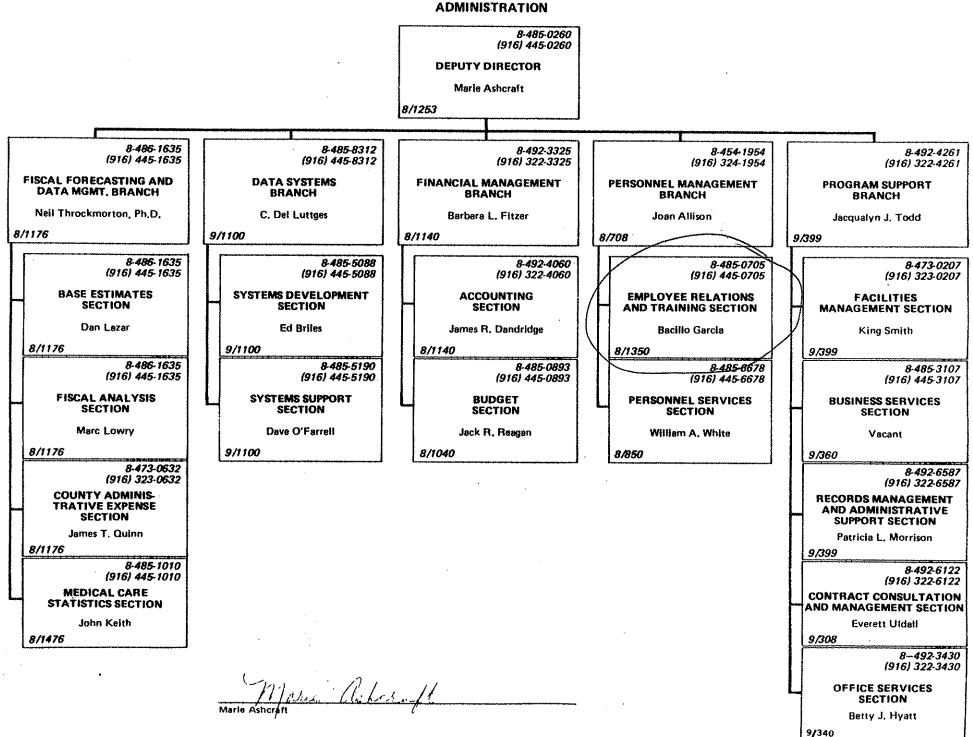
CALIFORNIA DEPARTMENT OF HEALTH SERVICES **ADMINISTRATION**



² Mark Shijo, Acting Chief, Budget Section.



CALIFORNIA DEPARTMENT OF HEALTH SERVICES ADMINISTRATION



November 1987

RECORDS RETE	NTION S	CHEDULE	Division (1) Administration				Branch(es Progra	am Sup	port		DHS schedule number (2) H99-013	8/13/99
м.			Facilities Planning and	Deve	elopn	nent					GS code	Page of pages (4)
See instructions on reve	Address (number, street, city) 1800 Third Street, Roc	ress (number, street, city) 300 Third Street, Room 455, Sacramento, CA 95814								number (5) 187		
ITEM CUBIC NUMBER FEET* (Triple space between items)	CALIFORNIA STATE ARCHIVES USE ONLY		DESCRIPTION OF RECORDS space between items)	MEDIA	VITAL	OFFICE	RETEI	NTION SRC	TOTAL	PRA (Exempt) and IPA	REMARKS	

The Facilities Planning and Development Section (FPDS) provides on a statewide basis, support services to meet the needs of the Department of Health Services (DHS) by promoting a safety and health work environment in all state facilities leased, owned, and/or operated b DHS. FPDS provides structures and building systems that enable the occupants to fulfill their unique missions through active upgrading and replacement program. This is accomplished by advance planning and through cooperative working relationships with the various DHS programs, the Department of Finance (DOF), the Department of General Services (DGS), and the Office of the State Fire Marshal (OSFM). Through communication with various departments, public health, safety, and welfare of the people we serve.

Schedule contains no vital records.

^{*}Provide total of office and departmental storage only.

		Ue	partment of Health Services
Division (1)	Branch(es)	DHS schedule number (2)	Date (3)
Administration	Program Support	H99-013	8/13/99
Section(s)	1	GS code	Page of pages (4)
Facilities Planning and Development			2. of 8
Address (number, street, city)		GS approval n	iumber (5)
1800 Third Street, Room 455, Sacramento	o, CA 95814	9 9.:	1 2 7

See instructions on reverse and in SAM 1600

See instruc	tions on reve	erse and in SA	4M 1600 1800 1 m ld Silvet, 1	COOLL 13	, Du		,	,,,,,			79°18/
ITEM NUMBER	CUBIC FEET*	CALIFORNIA STATE ARCHIVES	TITLE AND DESCRIPTION OF RECORDS					NTION		PRA (Exempt) and	
	petween items)	USE ONLY (8)	(Triple space between items) (9)	MEDIA (10)	VITAL (11)	OFFICE (12)	DEPT. (13)	SRC (14)	TOTAL (15)	IPA (16)	REMARKS (17)
		\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \	ADMINISTRATION								
			<u>Personnel</u>								
1	1		Employee Records	P		Active +2		3	Active +5	XI	PRA 6254, IPA 1798.40. Inactive when person is transferred or leaves state service Confidential Destruction. (CD)
2	3		Attendance	P		1				XI	PRA 6254; IPA 1798.40. CD.
3	A	NOTIFY RCHIVE	Duty Statements	P		Active			Active		Becomes inactive when superseded.
4			Work Policies	P		Active			Active		Becomes inactive when superseded.
5			Achievment Award	P		2			2		
6	The state of the s		Work Polices for Exempt Employees	P		Active			Active		Becomes inactive when superseded.
7	\		Training (FPDS Staff)	P		2			2	XI	PRA 6254; IPA 1798.40. CD.

^{*}Provide total of office and departmental storage only.

Division (1) Administration	Branch(es) Program Support	DHS schedule nu H99-013	mber (2)	Date (3) 8/13/99
Section(s) Facilities Planning and Development	<u> </u>	GS code		Page of pages (4)
Address (number, street, city)			GS approval n	umber (5)

1800 Third Street, Room 455, Sacramento, CA 95814 See instructions on reverse and in SAM 1600 PRA CALIFORNIA (Exempt) and RETENTION ITEM CUBIC STATE ARCHIVES TITLE AND DESCRIPTION OF RECORDS FEET NUMBER SRC TOTAL. REMARKS MEDIA VITAL OFFICE DEPT. **USE ONLY** (Triple space between items) (Triple space between items) (17) (16)(10)(13) $\{14\}$ (15)ADMINISTRATION Personnel PRA 6254, IPA 1798.40. CD. 2 P 2 Travel 8 3 Correspondence 2 P 9 Chron ARCHIVE Monthly Activity Reports P 2 P Equipment and Supplies General Information 12 Becomes inactive after requests are Active Purchase Request P Active 13 +6 mo. received. +6 mo.

^{*}Provide total of office and departmental storage only.

Department of Health Services DHS schedule number (2) Date (3) Division (1) Administration Program Support H99-013 8/13/99 Page of pages (4) GS code Facilities Planning and Development GS approval number (5)

Address (number, street, city)

See instructions on reverse and in SAM 1600

1800 Third Street, Room 455, Sacramento, CA 95814

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		CALIFORNIA						RETE	NTION		PRA (Exempt)	A 3 · 181
ITEM NUMBER (Triple space)	CUBIC FEET* petween items)	STATE ARCHIVES USE ONLY		ESCRIPTION OF RECORDS space between items)	MEDIA	VITAL	OFFICE	DEPT.	SRC	TOTAL	and IPA	REMARKS
(6)	(7)	(8)	ADMINISTRAT	(9)	(10)	(11)	(12)	(13)	(14)	(15)	(16)	(17)
			Equipment and S	Supplies								
14	1		Service Orders		P		Active			Active		Becomes inactive after requests are
							+6			+6		received.
			Records Manage	ment					******			
15	1			gs/Disposals/Annual	P		3			3		Retain three years from date submitted or when no longer need for reference or
			Report and Relat	led Documents					-			analysis, whichever is later.
16			Records Retention	on Schedule	P		Active			Active		Active until revised, superseded or
	\											rescinded.
÷												
			PROGRAM RE	CORDS								
			Capital Outlay F	iles								
17	2		General Capital	Outlay	P		Active			Active		Retain for ten years from date submitted o
							+10			+10		when no longer needed for reference or analysis, whichever is later.

^{*}Provide total of office and departmental storage only.

		Del	Jaitiffent of Health Oervices
Division (1)		DHS schedule number (2) H99-013	Date (3) 8/13/99
Administration	Program Support		
Section(s)		GS code	Page of pages (4)
Facilities Planning and Development			5 of 8
		GS approval p	umber (5)

Address (number, street, city)
1800 Third Street, Room 455, Sacramento, CA 95814 See instructions on reverse and in SAM 1600

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ITEM NUMBER	CUBIC FEET*	CALIFORNIA STATE ARCHIVES	TITLE AND D	ESCRIPTION OF RECORDS				RETE	ITION		PRA (Exempt) and	
(Triple space	between items)	USE ONLY		space between items)	MEDIA (10)	VITAL (11)	OFFICE (12)	DEPT. (13)	SRC (14)	TOTAL (15)	IPA (16)	REMARKS (17)
18	2	(8)	Ten Year Plans	(9)	P		Active +10	(10)	(14)	Active +10	(.0)	Retain for ten years from date submitted or when no longer needed for reference or analysis, whichever, is later.
			Financial									
19	pared		Budget Change I	Proposals	P		2			2		
20	\		Budget Letters		P		2			2		
21	5		Projects Richmond Labor	ratory	P		Active +10			Active +10		Retain ten years from date submitted or when no longer need for reference or analysis, whichever is later.
22	2	A control of the cont	Facility Files Temple Street		P		Active +4			Active +4		Retain for four years from date submitted or when no longer needed for reference or analysis, or the facility is no longer operational.

^{*}Provide total of office and departmental storage only.

Division (1)
Administration

Section(s)
Facilities Planning and Development

Address (number, street, city)

Department of Health Services

Date (3)
8/13/99

Services

Branch(es)
Program Support

GS code

Page of pages (4)

GS approval number (5)

See instructions on reverse and in SAM 1600

1800 Third Street, Room 455, Sacramento, CA 95814

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CUBIC	CALIFORNIA STATE						RETER	NTION		PRA (Exempt)	
etween items)	USE ONLY		space between items)			OFFICE (12)	DEPT. (13)	SRC (14)	TOTAL (15)	IPA (16)	REMARKS (17)
2	(6)	Berkeley Way		P		Active +4			Active +4		Retain for four years from date submitted or when no longer needed for reference or analysis, or the facility is no longer operational.
2		Acton Way		P		Active +4			Active +4		Retain for four years from date submitted or when no longer needed for reference or analysis, or the facility is no longer operational.
2		Lambie Road	·	P		Active +4			Active +4		Retain for four years from date submitted or when no longer needed for reference or analysis, or the facility is no longer operational.
		Legal									
100	Market A. K. Market	***							_		
	CHIVE	State (Bill Analy	ysis)	P		2			$\frac{1}{2}$		
A A	NOTIFY RCHIVE	Regulations (Sta	ate)	P		Active		A THE STATE OF THE	Active	x	Becomes inactive when revised. PRA 6254 (Contains correspondence To or from the Governor.) CD.
	cubic FEET' netween items) (7) 2	CUBIC FEET' actives items) (7) 2 2 2 1 ALCHIVES USE ONLY (8) 2	CUBIC FEET* Detween items) USE ONLY (8) 2 Berkeley Way 2 Acton Way Lambie Road Legal AI CHIVES STATE ARCHIVES USE ONLY (8) Berkeley Way Lambie Road Legal Lottery State (Bill Analy	CUBIC FEET* entween items) (7) 2 Berkeley Way Acton Way Lambie Road Legal Lottfy Al Chives NOTIFY All Chives NOTIFY All Chives NOTIFY All Chives NOTIFY All Chives State Archives State Archives Susce Only Title And Description of Records (Triple space between items) (9) Berkeley Way Lambie Road	CUBIC FEET* Detween items) (P) (S) (S) (Triple space between items) (P) (S) (S) (S) (S) (S) (S) (S) (S) (S) (S	CUBIC FEET' between items) CP TITLE AND DESCRIPTION OF RECORDS (Triple space between items) CP (10) (11) 2 Berkeley Way P 2 Acton Way P Lambie Road P Legal State (Bill Analysis) P NOTIFY State (Bill Analysis) P	CUBIC FEET ARCHIVES USE ONLY TITLE AND DESCRIPTION OF RECORDS (Triple space between items) When the substitution of the space between items (P) (Triple space between items) When the substitution (P) (Triple space between items) P Active +4 2 Acton Way P Active +4 2 Lambie Road P Active +4 Legal State (Bill Analysis) P 2	CUBIC FEET archives archives and state (Tiple space between items) 2 Berkeley Way P Active +4 Active +4 Legal State (Bill Analysis) P 2 NOTIFY NOTIFY ACTIFITY ARCHIVES STATE ARCHIVES TITLE AND DESCRIPTION OF RECORDS (Tiple space between items) (P Active +4 Active +4 P Active +4 P Active +4 P Active +4 I ACTIFY ARCHIVES NOTIFY ARCHIVES NOTIFY ARCHIVES	CUBIC FEET pervenen learners) CUBIC FEET (Triple space between items) CUBIC	CUBIC FEET perventions STATE ARCHIVES (Triple space between items) TITLE AND DESCRIPTION OF RECORDS (Triple space between items) MEDIA (11) (11) CTIEV (12) (13) SRC (14) TOTAL (15) (15) (14) Active +4 Activ	CUBIC FEET pervenent terms) CUBIC FEET prevenent terms) CUBIC FUEL prevenent terms t

^{*}Provide total of office and departmental storage only.

			Department of Health Services
Division (1) Administration	Branch(es) Program Support	DHS schedule number (2) H99-013	Date (3) 8/13/99
Section(s) Facilities Planning and Development		GS code	Page of pages (4)
Address (symbols ofrost pity)		GS approv	/al number (5)

			Address (number, street, city)								GS approval number (5)
See instruc	tions on reve	erse and in SA	1000 Thind Ctuast Da	om 45	5, Sa	crament	o, CA	95814			99.187
ITEM NUMBER	CUBIC FEET*	CALIFORNIA STATE ARCHIVES	TITLE AND DESCRIPTION OF RECORDS				RETEN	ITION		PRA (Exempt) and	
NUMBER (Triple space I (6)	PEEI* petween items) (7)	USE ONLY (8)	(Triple space between items) (9)	MEDIA (10)	VITAL (11)	OFFICE (12)	DEPT. (13)	SRC (14)	TOTAL (15)	IPA (16)	REMARKS (17)
			Policy and Procedures								
28		OTIFY CHIVES	Emergency Plan	P		Active +2			Active +2		Becomes inactive when superseded.
25		CHIVES	Energy Management Plan	P		Active +2			Active +2		Becomes inactive when superseded.
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^{*}Provide total of office and departmental storage only.

Department of Health Services DHS schedule number (2) Date (3) Division (1) H99-013 8/13/99 Program Support Administration GS code Page of pages (4) Facilities Planning and Development 8 of 8 Address (number, street, city) GS approval number (5)

1800 Third Street, Room 455, Sacramento, CA 95814

See instructions on reverse and in SAM 1600 CALIFORNIA RETENTION (Exempt) CUBIC STATE ITEM NUMBER FEET* **ARCHIVES** TITLE AND DESCRIPTION OF RECORDS and TOTAL REMARKS MEDIA VITAL OFFICE DEPT. SRC IPA. (Triple space between items) USE ONLY (Triple space between items) (10) (8) (9) Reconciliation: 87-301 87-301 New New 1 Ν 18 2 26 18 19 3 11 20 9 5 19/20 Р 28 10 27 11 12 13 14 15 31 В В 32 16 N = No Longer Required P = Maintained by Personnel Management Branch B = Maintained by Program Support Branch All items are new except 9, 11, 19, 20, 26 & 28.

^{*}Provide total of office and departmental storage only.